



**DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES  
DIVISION OF ENVIRONMENTAL HEALTH  
CHILD CARE FACILITY  
INSPECTION REPORT**

REASON		GRADE  D   RATING  A	Inspection Date:	ESTABLISHMENT NAME:	
Regular	✓		9/27/17	TAN VICTORIA'S CHAMORU DAY CARE	
Follow-Up			Time In/Out:	OWNER/OPERATOR:	
Complaint			4:15 PM   4:30 PM	IRIARTE MARIE LYNN	
Investigation		RATING  A	Sanitary Permit No.:	LOCATION:	Establishment Type:
Other:			20000-17000005	159 ETTON LN. SINAJANA	FAMILY DAY CARE HOME
No. of Children: 1 Male 4 Female 5 Total			PERMIT STATUS: ✓ Valid _____ Temporary _____ Expired		
			Child Care License No.: 170119 / ✓ Valid / / Provisional / / Expired		

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal a written request for hearing must be submitted before the indicated correction date.

[illegible]

I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.

**\*Note: When any of the following items are cited above, they shall be corrected within 10 days of this inspection:**

(2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40).

Received By (Name &amp; Title):

DEH Inspector (Name &amp; Title):

J. GARCIA